



Rockville Swim and Fitness Center

Lifeguard Training Schedule

Summer 2017

Become a Lifeguard!

The American Red Cross Lifeguard Training course will certify students in Lifeguard Training, CPR/AED for the Professional Rescuer, and First Aid. Students **must be 15 years old by the last day of the course** (proof of age required) and **pass a pre-screen test** (300 yard continuous swim with rhythmic breathing using front crawl or breast stroke, 10 lbs brick retrieval within one minute forty seconds and tread water using legs only for two minutes) on the first day of the session in order to continue participation in class. If a student does not pass the pre-screen, a course fee refund, minus \$10 administrative fee will be issued. Space is very limited. Class sessions will be held at the Rockville Swim and Fitness Center (355 Martins Lane Rockville MD 20850). A detailed Course Schedule / Syllabus will be provided on the first day of class. Students MUST attend all class sessions as scheduled.



Note: You **MUST** be able to attend all classes as scheduled to be certified.

Lifeguard Training	\$195.00	All Materials Included
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REGISTRATION INFORMATION:

Fill out the form on the reverse side of this flyer. You can register **in person** at any City of Rockville Recreation and Parks Facility, **on-line** at <https://rockenroll.rockvillemd.gov/>, **by fax** (240-314-8759), or **by mail** (355 Martins Lane Rockville MD 20850). Payment is due at the time of registration. If you have any questions, please call the Rockville Swim and Fitness Center at 240-314-8750 or email: swimcenter@rockvillemd.gov. Make checks payable to: "The City of Rockville".

Lifeguard Training Course #59726

(Includes CPR/AED and First Aid)

Day	Date	Times
Monday	6/12/17	6:00pm-10:00pm
Tuesday	6/13/17	6:00pm-10:00pm
Wednesday	6/14/17	6:00pm-10:00pm
Thursday	6/15/17	6:00pm-10:00pm
Friday	6/16/17	6:00pm-10:00pm
Saturday	6/17/17	6:00pm-10:00pm
Sunday	6/18/17	6:00pm-10:00pm

Lifeguard Training Course #59727

(Includes CPR/AED and First Aid)

Day	Date	Times
Sunday	7/09/17	6:00pm-10:00pm
Monday	7/10/17	6:00pm-10:00pm
Wednesday	7/12/17	6:00pm-10:00pm
Thursday	7/13/17	6:00pm-10:00pm
Friday	7/14/17	6:00pm-10:00pm
Saturday	7/15/17	6:00pm-10:00pm
Sunday	7/16/17	6:00pm-10:00pm

The City of Rockville is currently hiring Lifeguards, Swim Instructors, Front Desk and Support Staff for the summer season.

We offer great pay and a professional atmosphere. Safety training course fees are reimbursed to staff – ask for details. Applications are available on-line at www.rockvillemd.gov/careers

LIFEGUARD



City of
Rockville
Get Into It

Rockville Swim and Fitness Center
355 Martins Lane
Rockville MD 20850
240-314-8750
www.rockvillemd.gov/swimcenter



*required information

*First Name

DOB: _____

Sex: M/F

*Address:

*City/State/Zip.

*Secondary Phone

* Email Address:

EMERGENCY CONTACT: (other than parent or adult participant)

First Name

Last Name

Phone

PARTICIPANTS:

Name (Last, First)	Sex M/F	Birthdate M/D/Y	Activity/ Class Name	Course #	School Attending	Sch. Yr. '15-'16 Grade	Fee

Rec Fund: \$

Sr. Ctr. Mem: \$

Multi-Course Discount: \$

\$10

\$25

\$50

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Contribution

Total: \$

Special Needs: Participants with special needs should contact our office three weeks prior to activity.

Release, Waiver, Assumption of Risk and Consent

Participation in the program may be a hazardous activity. Participant should not participate in the program unless participant is in good physical shape and is medically able. Participant (or parent or guardian on behalf of a minor child participant) assumes all risks associated with participation in this program, including but not limited to, those generally associated with this type of program, the hazards of traveling on public roads, of accidents, of illness, and of the forces of nature. In consideration of the right to participate in the program and in further consideration of the arrangement made for the participant by the Mayor and Council of Rockville through its Department of Recreation and Parks for food, travel, and recreation, the participant, his or her heirs, and executors, or a parent or guardian on behalf of a minor child participant, agrees to release and indemnify the Mayor and Council of the City of Rockville and all of its agents, officers and employees, from any and all claims for injuries or loss of any person or property which may arise out of or result from participation in the program. The participant (or the parent or guardian on behalf of a minor child participant) grants permission for a doctor or emergency medical technician to administer emergency treatment of the participant and consents to the City's use of photographs taken or videotapes made of the program that include the participant. Neither the instructor nor any of the staff are responsible for participants prior to or after the scheduled program.

*Signature of Participant/Guardian

PAYMENT

Amount Paid \$

Cash ☒

Check #



Exp. Date

Signature (name on card)

OFFICE USE ONLY:

Check_____

Cash_____

Charge _____

Other

Processed by:

Date Processed:

Total Paid: \$